

**Class 1 Permit Modification Notifications**

**Revise WTS General Manager  
Revise Emergency Coordinator List,  
Revise Refresher Training to an Annual Requirement,  
Correct Typographical Error in Training Plan, and  
Correct Permit Inconsistencies**

**Waste Isolation Pilot Plant  
Carlsbad, New Mexico**

**WIPP HWFP #NM4890139088-TSDF**

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## **Acronyms and Abbreviations**

CBFO	Carlsbad Field Office
CFR	Code of Federal Regulations
DOE	Department of Energy
HWFP	Hazardous Waste Facility Permit
NMAC	New Mexico Administrative Code
NMED	New Mexico Environment Department
PMN	Permit Modification Notification
RCRA	Resource Conservation and Recovery Act
TSDf	Treatment, Storage and Disposal Facility
WIPP	Waste Isolation Pilot Plant
WTS	Washington TRU Solutions LLC

## Overview of the Permit Modification Notification

This document contains several Class 1 Permit Modification Notifications (**PMN**) to the Hazardous Waste Facility Permit (**HWFP**) at the Waste Isolation Pilot Plant (**WIPP**), Permit Number NM4890139088-TSDF hereinafter referred to as the WIPP HWFP.

These PMNs are being submitted by the U.S. Department of Energy (**DOE**), Carlsbad Field Office (**CBFO**) and Washington TRU Solutions LLC (**WTS**), collectively referred to as the Permittees, in accordance with the WIPP HWFP, Condition I.B.1 (20.4.1.900 New Mexico Administrative Code (**NMAC**) incorporating Title 40 of the Code of Federal Regulations (40 **CFR**) §270.42(a)). The PMNs in this document is necessary for the following reasons:

- revise the general manager and permit signatory of WTS,
- to update the HWFP Emergency Coordinator List in the WIPP Contingency Plan,
- to revise the refresher training to reflect then number of hours required on an annual basis,
- to correct a typographical error in the Training Program, and
- correct permit inconsistencies.

This change does not reduce the ability of the Permittees to provide continued protection to human health and the environment.

The requested modifications to the WIPP HWFP and related supporting documents are provided in this PMN. The proposed modification to the text of the WIPP HWFP has been identified using a double underline and revision bar in the right hand margin for added information, and a ~~strikeout~~ font for deleted information. All direct quotations are indicated by italicized text.

## **Attachment A**

### **Description of the Class 1 Permit Modification Notifications**

**Table 1. Class 1 Hazardous Waste Facility Permit Modification Notification**

<b>No.</b>	<b>Affected Permit Section</b>	<b>Item</b>	<b>Category</b>	<b>Attachment A Page #</b>
1	Attachment A Attachment O	Revise WTS General Manager	A.1	A-3
2	Attachment F	Update Emergency Coordinator List	B.6.d	A-5
3	Attachment H1 Attachment H2	Revise the Refresher Training to Reflect the Requirements on an Annual Basis.	B.5.b	A-7
4	Attachment H1	Fix Typographical Error	A.2	A-10
5	Module V Attachment A Attachment L Attachment F	Correct permit inconsistencies	A.1	A-11

## Item 1

### Description:

Revise the HWFP to change the MOC General Manager from Steven D. Warren to Richard D. Raaz, effective January 31, 2005.

### Basis:

The change is administrative and informational in nature and is therefore a Class 1 notification pursuant to 20.4.1.900 NMAC (incorporating 40 CFR 270.42, Appendix I, A.1).

### Discussion:

On January 31, 2005, Mr. Steven D. Warren was replaced by Mr. Richard D. Raaz, as the General Manager and responsible official for the MOC. This HWFP change is necessary as Mr. Raaz becomes the signatory authority for the MOC.

### Revised Permit Text:

#### a.1. Attachment A, Section A-1

NAME OF FACILITY:	Waste Isolation Pilot Plant
OWNER and CO-OPERATOR:	U.S. Department of Energy P.O. Box 3090 Carlsbad, NM 88221
CO-OPERATOR:	Washington TRU Solutions LLC P.O. Box 2078 Carlsbad, NM 88221
RESPONSIBLE OFFICIALS:	Ines Triay, Acting Manager DOE/Carlsbad Field Office <del>Dr. Steven Warren</del> <u>Richard D. Raaz</u> , General Manager

Washington TRU Solutions  
LLC

FACILITY MAILING ADDRESS: U.S. Department of Energy  
P.O. Box 3090  
Carlsbad, NM 88221

FACILITY LOCATION: 30 miles east of Carlsbad on  
the Jal Highway, in Eddy  
County.

TELEPHONE NUMBER: 505/234-7300

U.S. EPA I.D. NUMBER: NM4890139088

GEOGRAPHIC LOCATION: 32° 22' 30" N  
103° 47' 30" W

DATE OPERATIONS BEGAN: November 26, 1999

b.1. Attachment O, Part A Application

A revised Part A Application is included in Attachment B



## Item 2

### Description:

Revise the HWFP to update the list of Emergency Coordinators

### Basis:

The change is to the name, address and phone number of the primary emergency coordinator and is therefore a Class 1 notification pursuant to 20.4.1.900 NMAC (incorporating 40 CFR 270.42, Appendix I, B.6.d).

### Discussion:

A primary emergency coordinator is being deleted and a new primary emergency coordinator is being added. The home address and home telephone numbers will be supplied to NMED only.

### Revised Permit Text:

a.1. Attachment F, Table F-2

**TABLE F-2**

### **RESOURCE CONSERVATION AND RECOVERY ACT EMERGENCY COORDINATORS**

Name	Address	Office Phone	Home Phone
G. A. (Gerry) Burns (primary) <sup>1</sup>	_____	234-8276 or 234-8635	_____
R. A. (Richard) Marshall (primary) <sup>1</sup>		234-8276 or 234-8695	
R. C. (Russ) Stroble (primary) <sup>1</sup>		234-8554	
M. L. (Tex) Winans (primary) <sup>1</sup>		234-8276 or 234-8273	
J.E. (Joseph) Bealler <sup>2</sup>		234-8619	
M.G. (Mike) Proctor <sup>2</sup>		234-8143	
G. L. (Gary) Kessler <sup>2</sup>		234-8326	
A. E. (Alvy) Williams <sup>1</sup> (primary)		234-8216 or 234-8276	
P.J. (Paul) Paneral <sup>2</sup>		234-8498	
M.L. (Mark) Long <sup>2</sup>		234-8170	

\*NOTE: Personal information (home addresses and phone numbers) has been removed from information copies of this application.

<sup>1</sup> The on-duty Facility Shift Manager is the primary RCRA Emergency Coordinator pursuant to 20.4.1.500 NMAC (incorporating 40 CFR §264.52) and is designated to serve as the RCRA Emergency Coordinator.

<sup>2</sup> The on-duty Facility Operations Engineer is the alternate RCRA Emergency

### **Item 3**

**Description:**

Revise the Training Program to reflect the hours required for refresher training on an annual or biennial basis and to update a procedure for Mine Rescue Team Members.

**Basis:**

The change is to the Training Program and does not affect the type or decrease the amount of training given to the employees and is therefore classified as an “Other change” to the training plan. This is therefore a Class 1 notification pursuant to 20.4.1.900 NMAC (incorporating 40 CFR 270.42, Appendix I, B.5.b).

**Discussion:**

This is a change to the frequency of training. Initial Mine Rescue requires refresher training on a monthly basis. The Permittees are changing this refresher training requirement to reflect refresher training on an annual basis (e.g., Initial Mine Rescue will change from 4 hours monthly to 48 hours annually). There will be no reduction in the amount of training required nor in the scope of training required. This change simply allows flexibility in when the training occurs.

The refresher training for the Subject Matter Expert is listed as occurring on a biannual basis. This was meant to be on a “biennial” basis. This is being clarified to indicate that refresher training is required “every two years”.

The RCRA Waste Management Job Description for the Mine Rescue Team members lists the Supplemental Emergency Response Plan (SERP) as the document with which they must be able to comply. This has been revised to the WIPP Emergency Management Program (WP 12-9). This change will incorporate that document into the training program description.

There are no state or federal regulations which preclude these changes being made as a Class 1 modification.

**Revised Permit Text:**

a.1. Attachment H2

**COURSE:** TRG-293/298 - Subject Matter Expert and On-the-Job Training

<b>DURATION:</b>	≈4 hours
<b>PREREQUISITES:</b>	Manager Approval
<b>TYPE:</b>	Classroom
<b>SCOPE:</b>	The instructor will provide the training skills and knowledge necessary to perform the role of subject matter expert (SME)/on-the-job trainer (OJT).
<b>OBJECTIVE:</b>	<p>Upon completion of this course the student will be able to perform the instructional duties of a Level I Instructor (SME/OJT trainer) In compliance with WIPP training policies.</p> <p>Mastery of the terminal objective will be demonstrated by scoring 80 percent or higher on the course examination.</p>
<b>REFRESHER:</b>	<del>Biannual</del> <u>Every Two Years</u>

a.2 Attachment H2

<b>COURSE:</b>	EOC-101 - Initial Mine Rescue
<b>DURATION:</b>	20 Hours
<b>PREREQUISITES:</b>	Physical, underground experience
<b>SCOPE:</b>	
<b>TYPE:</b>	Classroom, field, hands-on
<b>OBJECTIVES:</b>	Upon completion of this training, the student will be able to wear and maintain a Drager self-contained breathing apparatus, and perform all the functions required as a member of a mine rescue team.
<b>REFRESHER:</b>	<del>Training is conducted 4 hours monthly</del> <u>48 hours of refresher training is required annually</u>

a.3 Attachment H1

**RCRA Hazardous Waste Management Job Descriptions**

**Position Title:** Mine Rescue Team Member

**Duties:**

- Cooperate, participate, and comply with provisions of the ~~Supplemental Emergency Response Program Plan (SERP)~~ WIPP Emergency Management Program (WP 12-9)
- Trained in accordance with 30 CFR to respond to mine emergencies beyond that of the FLIRT
- Responsible for underground reentry and rescue after an underground evacuation

## Item 4

### Description:

Revise the Training Program to correct a typographical error.

### Basis:

The change is to the Training Program and is listed as a “*Correction of typographical errors*” and is therefore a Class 1 notification pursuant to 20.4.1.900 NMAC (incorporating 40 CFR 270.42, Appendix I, A.2).

### Discussion:

The job description in Attachment H1 for the Emergency Response Team incorrectly lists Authorization Card MRT-01. MRT-01 is for the mine rescue team which responds to underground emergencies. ERT members respond to surface emergencies. The correct citation should be ERT-01. This modification will correct that discrepancy.

### Revised Permit Text:

a.1. Attachment H1

## RCRA Hazardous Waste Management Job Descriptions

**Position Title:** Emergency Response Team

### **Duties:**

- Responding to hazardous waste incidents or releases due to fires, HAZMAT, and medical emergencies
- Operating as part of the WIPP Supplemental Emergency Response Program

### **Requisite Skills, Experience, and Education:**

High School Diploma or equivalent, written approval from employee's manager (Authorization Card ~~MRT-01~~ ERT-01), compliance with health and physical requirements:

- 1) Initial examination and clearance by the Occupational Medical Director
- 2) Examined and cleared annually by the Occupational Medical Director
- 3) Additional tests: pulmonary function test, cardiac stress test every five years, drug screening.

## Item 5

### Description:

Revise the permit to correct inconsistencies, correct terminology and correct procedure references.

### Basis:

The change is to various portions of the HWFP and is listed as “*Administrative and informational changes*” and is therefore a Class 1 notification pursuant to 20.4.1.900 NMAC (incorporating 40 CFR 270.42, Appendix I, A.1).

### Discussion:

There are several locations within the HWFP which require changes to reflect correct terminology, correct references or correct inconsistencies. These are:

- correct Attachment A to use the terms drifts in place of tunnels as the term drifts is used throughout the HWFP,
- replace procedure WP 02-119 with WP 02-EM1014 in Attachment L, both procedures are exactly the same and only the tracking number has changed,
- correct the top of the casing elevation for WQSP-6 and WQSP-6a in Module V as these numbers were transposed, and
- correct Figure F-8 to reflect current structures and assembly areas.

### Revised Permit Text:

#### a.1. Attachment A

#### A-4 Facility Type

There are three basic groups of structures associated with the WIPP facility: surface structures, shafts and underground structures. The surface structures accommodate the personnel, equipment, and support services required for the receipt, preparation, and transfer of TRU mixed waste from the surface to the underground. There are two surface locations where TRU mixed waste will be managed. The first includes a portion of the Waste Handling Building (WHB), of which 33,175 square feet is designated as the WHB Container Storage Unit (WHB Unit) for TRU mixed waste management. The second area designated for managing TRU mixed waste is the Parking Area Container Storage Unit (Parking Area Unit), an outside container storage area which extends south from the WHB to the rail siding. The Parking Area Unit provides storage space for up to 12 loaded Contact Handled Packages on an asphalt and concrete surface encompassing approximately 115,000 square feet.

Four vertical shafts connect the surface facility to the underground. These are the Waste Shaft, the Salt Handling Shaft, the Exhaust Shaft and the Air Intake Shaft. The Waste Shaft is the only shaft used to transport TRU mixed waste to the underground. The WIPP underground structures are located in a mined salt bed 2,150 feet below the surface.

The underground structures include the underground Hazardous Waste Disposal Units (**HWDUs**), an area for future underground HWDUs, the shaft pillar area, interconnecting ~~tunnels~~ **drifts** and other areas unrelated to the RCRA Hazardous Waste Permit. The underground HWDUs are defined as waste panels, each consisting of seven rooms and two access drifts. The WIPP underground area is designated as Panels 1 through 10, although only Panels 1 through 3 will be used under the terms of this permit. Each of the seven rooms is approximately 300 feet long, 33 feet wide and 13 feet high.

## b.1 Attachment L

### L-4c(1)(i) Field Methods and Data Collection Requirements

To obtain an accurate ground-water surface elevation measurement, a calibrated water-level measuring device will be lowered into a test well and the depth to water recorded from a known reference point. When using an electrical conductance probe, the depth to water will be determined by reading the appropriate measurement markings on the embossed measuring tape when the alarm is activated at the surface. WIPP Procedure ~~WP-02-119~~ **WP 02-EM1014** specifies the methods to be used in obtaining groundwater-level measurements. A current revision of this procedure will be maintained in the WIPP Operating Record.



c.1 Module V

V.C.1 Well Locations


The Permittees shall maintain the DMWs at the locations specified on the map in Figure L-8 of Permit Attachment L, as required by 20.4.1.500 NMAC (incorporating 40 CFR §264.97(a) and §264.98(b)), and as specified in Table V.C.1 below:

Table V.C.1 - Well Locations				
Well Name	State Plane Coordinates	Top of Casing Elevation (ft amsl)	Screen Interval Depth (ft below casing top)	Sampled Unit
WQSP-1	663600E, 503774N	3419.2	702 - 727	Culebra
WQSP-2	667598E, 505542N	3463.9	811 - 836	Culebra
WQSP-3	670576E, 504030N	3480.3	844 - 869	Culebra
WQSP-4	670658E, 495000N	3433.0	764 - 789	Culebra
WQSP-5	667170E, 493666N	3384.4	646 - 671	Culebra
WQSP-6	663691E, 494942N	<del>3363.8</del> 3364.7	581 - 606	Culebra
WQSP-6a	663625E, 494969N	<del>3364.7</del> 3363.8	189 - 214	Dewey Lake

d. Attachment F - Figure F-8

A revised Figure F-8 is included in Attachment B

**Attachment B**  
**Attachment O**  
**Part A Application**

<b>For EPA Regional Use Only</b>		<div style="text-align: center;"> United States Environmental Protection Agency Washington, DC 20460 <b>Hazardous Waste Permit Application Part A</b> <i>(Read the Instructions before starting)</i></div>																														
<b>Date Received</b>																																
<b>Month</b>	<b>Day</b>			<b>Year</b>																												
<b>I. Facility's EPA ID Number (Mark 'X' in the appropriate box)</b>																																
<input type="checkbox"/> A. First Part A Submission			<input checked="" type="checkbox"/> B. Revised Part A Submission (Amendment # <u>19</u> )																													
<b>C. Facility's EPA ID Number</b>			<b>D. Secondary ID Number (If applicable)</b>																													
N	M	4	8	9	0	1	3	9	0	8	8																					
<b>II. Name of Facility</b>																																
W	A	S	T	E		I	S	O	L	A	T	I	O	N		P	I	L	O	T		P	L	A	N	T						
<b>III. Facility Location (Physical address not P.O. Box or Route Number)</b>																																
<b>A. Street</b>																																
3	0		M	I	L	E	S		E	A	S	T		O	F		C	A	R	L	S	B	A	D		O	N					
<b>Street (Continued)</b>																																
J	A	L		H	I	G	H	W	A	Y																						
<b>City or Town</b>												<b>State</b>		<b>Zip Code</b>																		
C	A	R	L	S	B	A	D									N	M	8	8	2	2	1	—									
<b>County Code (if known)</b>		<b>County Name</b>																														
0	3		E	D	D	Y																										
<b>B. Land Type</b>		<b>C. Geographic Location</b>												<b>D. Facility Existence Date</b>																		
(Enter code)		<b>LATITUDE (Degrees, minutes, &amp; seconds)</b>						<b>LONGITUDE (Degrees, minutes &amp; seconds)</b>						<b>Month</b>		<b>Day</b>		<b>Year</b>														
F		3	2	2	2	3	0	N	1	0	3	4	7	3	0	W	0	5	1	8	1	9	8	1								
<b>IV. Facility Mailing Address</b>																																
<b>Street or P.O. Box</b>																																
P	O		B	O	X		3	0	9	0																						
<b>City or Town</b>												<b>State</b>		<b>Zip Code</b>																		
C	A	R	L	S	B	A	D									N	M	8	8	2	2	1	—	3	0	9	0					
<b>V. Facility Contact (Person to be contacted regarding waste activities at facility)</b>																																
<b>Name (Last)</b>										<b>(First)</b>																						
T	R	I	A	Y						I	N	E	S																			
<b>Job Title</b>										<b>Phone Number (Area Code and Number)</b>																						
A	C	T	I	N	G		M	A	N	A	G	E	R		5	0	5	—	2	3	4	—	7	3	0	0						
<b>VI. Facility Contact Address (See instructions)</b>																																
<b>A. Contact Address</b>		<b>B. Street or P.O. Box</b>																														
Location Mailing Other																																
	X		P	O		B	O	X		3	0	9	0																			
<b>City or Town</b>												<b>State</b>		<b>Zip Code</b>																		
C	A	R	L	S	B	A	D									N	M	8	8	2	2	1	—	3	0	9	0					

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N	M	4	8	9	0	1	3	9	0	8	8												

**XI. Nature of Business (Provide a brief description)**

The Waste Isolation Pilot Plant (WIPP) is a U.S. Department of Energy facility intended to demonstrate the technical and operational principles involved in the permanent isolation and disposal of defense-generated transuranic waste. For purposes of RCRA, WIPP operations entail receiving, unloading, and transferring radioactive-mixed waste from the surface of the site to the underground hazardous waste management units. Waste will be emplaced in an underground geologic repository horizon located in a deep-bedded salt formation approximately 2,150 feet beneath the surface.

**XII. Process Codes and Design Capacities**

**A. PROCESS CODE** - Enter the code from the list of process codes below that best describes each process to be used at the facility. Thirteen lines are provided for entering codes. If more lines are needed, attach a separate sheet of paper with the additional information. For "other" processes (i.e., D99, S99, T04 and X99), describe the process (including its design capacity) in the space provided in item XIII.

**B. PROCESS DESIGN CAPACITY** - For each code entered in column A, enter the capacity of the process.

1. **AMOUNT** - Enter the amount. In a case where design capacity is not applicable (such as in a closure/post-closure or enforcement action) enter the total amount of waste for that process.
2. **UNIT OF MEASURE** - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

**C. PROCESS TOTAL NUMBER OF UNITS** - Enter the total number of units used with the corresponding process code.

PROCESS CODE	PROCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS CODE	PROCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	
<u>Disposal:</u>						
D79	Underground Injection Well Disposal	Gallons; Liters; Gallons Per Day; or Liters Per Day	T81	Cement Kiln	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; Btu Per Hour; Liters Per Hour; Kilograms Per Hour; or Million Btu Per Hour	
D80	Landfill	Acre-feet; Hectare-meter; Acres; Cubic Meters; Hectares; Cubic Yards	T82	Lime Kiln		
D81	Land Treatment	Acres or Hectares	T83	Aggregate Kiln		
D82	Ocean Disposal	Gallons Per Day or Liters Per Day	T84	Phosphate Kiln		
D83	Surface Impoundment Disposal	Gallons; Liters; Cubic Meters; or Cubic Yards	T85	Coke Oven		
D99	Other Disposal	Any Unit of Measure Listed Below	T86	Blast Furnace		
<u>Storage:</u>						
S01	Container	Gallons; Liters; Cubic Meters; or Cubic Yards	T87	Smelting, Melting, Or Refining Furnace	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; Btu Per Hour; Gallons Per Hour; Liters Per Hour; or Million Btu Per Hour	
S02	Tank Storage	Gallons; Liters; Cubic Meters; or Cubic Yards	T88	Titanium Dioxide Chloride Oxidation Reactor		
S03	Waste Pile	Cubic Yards or Cubic Meters	T89	Methane Reforming Furnace		
S04	Surface Impoundment Storage	Gallons; Liters; Cubic Meters; or Cubic Yards	T90	Pulping Liquor Recovery Furnace		
S05	Drip Pad	Gallons; Liters; Acres; Cubic Meters; Hectares; or Cubic Yards	T91	Combustion Device Used In The Recovery Of Sulfur Values From Spent Sulfuric Acid		
S06	Containment Building	Cubic Yards or Cubic Meters	T92	Halogen Acid Furnaces	Cubic Yards; Cubic Meters; Short Tons Per Hour; Gallons Per Hour; Liters Per Hour; Btu Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Metric Tons Per Day; Gallons Per Day; Liters Per Day; Metric Tons Per Hour; or Million Btu Per Hour	
S99	Other Storage	Any Unit of Measure Listed Below	T93	Other Industrial Furnaces Listed in 40 CFR §260.10		
<u>Treatment:</u>			T94	Containment Building - Treatment	Any Unit of Measure Listed Below	
T01	Tank Treatment	Gallons Per Day; Liters Per Day; Short Tons Per Hour; Gallons Per Hour; Liters Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Metric Tons Per Day; or Metric Tons Per Hour	<u>Miscellaneous (Subpart X):</u>			
T02	Surface Impoundment Treatment	Gallons Per Day; Liters Per Day; Short Tons Per Hour; Gallons Per Hour; Liters Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Metric Tons Per Day; or Metric Tons Per Hour	X01	Open Burning/Open Detonation		
T03	Incinerator	Short Tons Per Hour; Metric Tons Per Hour; Gallons Per Hour; Liters Per Hour; Btu Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Gallons Per Day; Liters Per Day; Metric Tons Per Hour; or Million Btu Per Hour	X02	Mechanical Processing		
T04	Other Treatment	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; Btu Per Hour; Gallons Per Day; Liters Per Hour; or Million Btu Per Hour	X03	Thermal Unit		
T80	Boiler	Gallons; Liters; Gallons Per Hour; Liters Per Hour; Btu Per Hour; or Million Btu Per Hour	X04	Geologic Repository		
			X99	Other Subpart X	Any Unit of Measure Listed Below	

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
Gallons .....	G	Short Tons Per Hour .....	D	Cubic Yards .....	Y
Gallons Per Hour .....	E	Metric Tons Per Hour .....	W	Cubic Meters .....	C
Gallons Per Day .....	U	Short Tons Per Day .....	N	Acres .....	B
Liters .....	L	Metric Tons Per Day .....	S	Acre-feet .....	A
Liters Per Hour .....	H	Pounds Per Hour .....	J	Hectares .....	Q
Liters Per Day .....	V	Kilograms Per Hour .....	R	Hectare-meter .....	F
		Million Btu Per Hour .....	X	Btu Per Hour .....	I

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Secondary ID Number (Enter from page 1)

N M 4 8 9 0 1 3 9 0 8 8

## XII. Process Codes and Design Capabilities (Continued)

EXAMPLE FOR COMPLETING ITEM XII (shown in line number X-1 below): A facility has a storage tank, which can hold 533.788 gallons.

Line Number	A. Process Code (From list above)				B. PROCESS DESIGN CAPACITY		C. Process Total Number Of Units	For Official Use Only			
					1. Amount (Specify)	2. Unit Of Measure (Enter code)					
X 1	S	0	2		5 3 3 . 7 8 8	G	0 0 1				
1	X	0	4		175,600 Total (54,064 in 10 years)	C	0 1 0				
2					See attached page for additional process information						
3	S	0	1		91.9	C	0 0 1				
4					WHB Container Storage Unit See attached page for additional process information						
5	S	0	1		47.1	C	0 0 1				
6					Parking Area Container Storage Unit See attached page for additional process information						
7											
8											
9											
1 0											
1 1											
1 2											
1 3											

NOTE: If you need to list more than 13 process codes, attach an additional sheet(s) with the information in the same format as above. Number the lines sequentially, taking into account any lines that will be used for "other" processes (i.e., D99, S99, T04 and X99) in item XIII.

## XIII. Other Processes (Follow instructions from item XII for D99, S99, T04 and X99 process codes)

Line Number (Enter #s in seg w/XII)	A. Process Code (From list above)				B. PROCESS DESIGN CAPACITY		C. Process Total Number Of Units	D. Description Of Process
					1. Amount (Specify)	2. Unit Of Measure (Enter code)		
X 1	T	0	4		.			In-situ Vitrification
1					.			
2					.			
3					.			
4					.			



EPA ID Number (Enter from page 1)												Secondary ID Number (Enter from page 1)											
N	M	4	8	9	0	1	3	9	0	8	8												

**XIV. Description of Hazardous Wastes**

- A. EPA HAZARDOUS WASTE NUMBER** - Enter the four-digit number from 40 CFR, Part 261 Subpart D of each listed hazardous waste you will handle. For hazardous wastes which are not listed in 40 CFR, Part 261 Subpart D, enter the four-digit number(s) from 40 CFR, Part 261 Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY** - For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE** - For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

**D. PROCESSES****1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in item XII A. on page 3 to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in item XII A. on page 3 to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

**NOTE: THREE SPACES ARE PROVIDED FOR ENTERING PROCESS CODES. IF MORE ARE NEEDED:**

1. Enter the first two as described above.
2. Enter "000" in the extreme right box of item XIV-D(1).
3. Use additional sheet, enter line number from previous sheet, and enter additional code(s) in item XIV-E.

- 2. PROCESS DESCRIPTION:** If a code is not listed for a process that will be used, describe the process in the space provided on the form (D.(2)).

**NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER** - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each EPA Hazardous Waste Number that can be used to describe the hazardous waste.

**EXAMPLE FOR COMPLETING ITEM XIV** (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

Line Number	A. EPA HAZARD WASTE NO. (Enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (Enter code)	D. PROCESS									
				(1) PROCESS CODES (Enter)					(2) PROCESS DESCRIPTION (If a code is not entered in D(1))				
X 1	K 0 5 4	900	p	T	0	3	D	8	0				
X 2	D 0 0 2	400	P	T	0	3	D	8	0				
X 3	D 0 0 1	100	P	T	0	3	D	8	0				
X 4	D 0 0 2												Included With Above

EPA ID Number (Enter from page 1)												Secondary ID Number (Enter from page 1)											
N	M	4	8	9	0	1	3	9	0	8	8												
XIV. Description of Hazardous Wastes (Continued; use additional sheets as necessary)																							
Line Number	A. EPA Hazardous Waste No. (Enter code)					B. Estimated Annual Quantity of Waste	C. Unit of Measure (Enter code)	D. PROCESSES															
								(1) PROCESS CODES (Enter code)												(2) PROCESS DESCRIPTION (If a code is not entered in D(1))			
	1	F	0	0	1	1,891	M	X	0	4	S	0	1	S	0	1							
	2	F	0	0	2	1,860	M	X	0	4	S	0	1	S	0	1							
	3	F	0	0	3	1,593	M	X	0	4	S	0	1	S	0	1							
	4	F	0	0	4	26	M	X	0	4	S	0	1	S	0	1							
	5	F	0	0	5	1,829	M	X	0	4	S	0	1	S	0	1							
	6	F	0	0	6	915	M	X	0	4	S	0	1	S	0	1							
	7	F	0	0	7	915	M	X	0	4	S	0	1	S	0	1							
	8	F	0	0	9	915	M	X	0	4	S	0	1	S	0	1							
	9	D	0	0	4	903	M	X	0	4	S	0	1	S	0	1							
1	0	D	0	0	5	484	M	X	0	4	S	0	1	S	0	1							
1	1	D	0	0	6	1,819	M	X	0	4	S	0	1	S	0	1							
1	2	D	0	0	7	1,248	M	X	0	4	S	0	1	S	0	1							
1	3	D	0	0	8	3,246	M	X	0	4	S	0	1	S	0	1							
1	4	D	0	0	9	1,727	M	X	0	4	S	0	1	S	0	1							
1	5	D	0	1	0	186	M	X	0	4	S	0	1	S	0	1							
1	6	D	0	1	1	1,090	M	X	0	4	S	0	1	S	0	1							
1	7	D	0	1	8	749	M	X	0	4	S	0	1	S	0	1							
1	8	D	0	1	9	761	M	X	0	4	S	0	1	S	0	1							
1	9	D	0	2	1	26	M	X	0	4	S	0	1	S	0	1							
2	0	D	0	2	2	1,098	M	X	0	4	S	0	1	S	0	1							
2	1	D	0	2	6	609	M	X	0	4	S	0	1	S	0	1							
2	2	D	0	2	7	26	M	X	0	4	S	0	1	S	0	1							
2	3	D	0	2	8	449	M	X	0	4	S	0	1	S	0	1							
2	4	D	0	2	9	478	M	X	0	4	S	0	1	S	0	1							
2	5	D	0	3	0	26	M	X	0	4	S	0	1	S	0	1							
2	6	D	0	3	2	26	M	X	0	4	S	0	1	S	0	1							
2	7	D	0	3	4	26	M	X	0	4	S	0	1	S	0	1							
2	8	D	0	3	5	139	M	X	0	4	S	0	1	S	0	1							
2	9	D	0	3	6	26	M	X	0	4	S	0	1	S	0	1							
3	0	D	0	3	7	26	M	X	0	4	S	0	1	S	0	1							
3	1	D	0	3	8	26	M	X	0	4	S	0	1	S	0	1							
3	2	D	0	3	9	26	M	X	0	4	S	0	1	S	0	1							
3	3	D	0	4	0	140	M	X	0	4	S	0	1	S	0	1							
3	4	D	0	4	3	26	M	X	0	4	S	0	1	S	0	1							
3	5	P	0	1	5	945	M	X	0	4	S	0	1	S	0	1							



EPA ID Number (Enter from page 1)												Secondary ID Number (Enter from page 1)											
N	M	4	8	9	0	1	3	9	0	8	8												
XIV. Description of Hazardous Wastes (Continued; use additional sheets as necessary)																							
Line Number		A. EPA Hazardous Waste No. (Enter code)				B. Estimated Annual Quantity of Waste	C. Unit of Measure (Enter code)	D. PROCESSES															
								(1) PROCESS CODES (Enter code)												(2) PROCESS DESCRIPTION (If a code is not entered in D(1))			
	1	U	0	0	2	344	M	X	0	4	S	0	1	S	0	1							
	2	U	0	1	9	344	M	X	0	4	S	0	1	S	0	1							
	3	U	0	3	7	344	M	X	0	4	S	0	1	S	0	1							
	4	U	0	4	3	344	M	X	0	4	S	0	1	S	0	1							
	5	U	0	4	4	344	M	X	0	4	S	0	1	S	0	1							
	6	U	0	5	2	344	M	X	0	4	S	0	1	S	0	1							
	7	U	0	7	0	344	M	X	0	4	S	0	1	S	0	1							
	8	U	0	7	2	344	M	X	0	4	S	0	1	S	0	1							
	9	U	0	7	8	344	M	X	0	4	S	0	1	S	0	1							
1	0	U	0	7	9	344	M	X	0	4	S	0	1	S	0	1							
1	1	U	1	0	5	344	M	X	0	4	S	0	1	S	0	1							
1	2	U	1	2	2	344	M	X	0	4	S	0	1	S	0	1							
1	3	U	1	3	3	344	M	X	0	4	S	0	1	S	0	1							
1	4	U	1	5	1	344	M	X	0	4	S	0	1	S	0	1							
1	5	U	1	5	4	344	M	X	0	4	S	0	1	S	0	1							
1	6	U	1	5	9	344	M	X	0	4	S	0	1	S	0	1							
1	7	U	1	9	6	344	M	X	0	4	S	0	1	S	0	1							
1	8	U	2	0	9	344	M	X	0	4	S	0	1	S	0	1							
1	9	U	2	1	0	344	M	X	0	4	S	0	1	S	0	1							
2	0	U	2	2	0	344	M	X	0	4	S	0	1	S	0	1							
2	1	U	2	2	6	344	M	X	0	4	S	0	1	S	0	1							
2	2	U	2	2	8	344	M	X	0	4	S	0	1	S	0	1							
2	3	U	2	3	9	344	M	X	0	4	S	0	1	S	0	1							
2	4	P	1	2	0	3.3	M	X	0	4	S	0	1	S	0	1							
2	5	U	1	3	4	344	M	X	0	4	S	0	1	S	0	1							
2	6	D	0	3	3	344	M	X	0	4	S	0	1	S	0	1							
2	7	P	0	3	0	344	M	X	0	4	S	0	1	S	0	1							
2	8	P	0	9	8	344	M	X	0	4	S	0	1	S	0	1							
2	9	P	0	9	9	344	M	X	0	4	S	0	1	S	0	1							
3	0	P	1	0	6	344	M	X	0	4	S	0	1	S	0	1							
3	1	U	0	0	3	344	M	X	0	4	S	0	1	S	0	1							
3	2	U	1	0	3	344	M	X	0	4	S	0	1	S	0	1							
3	3	U	1	0	8	344	M	X	0	4	S	0	1	S	0	1							
3	4																						
3	5																						

EPA ID Number (Enter from page 1)

N M 4 8 9 0 1 3 9 0 8 8

Secondary ID Number (Enter from page 1)

## XV. Map

Attach to this application a topographic map, or other equivalent map, of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in this map area. See instructions for precise requirements.

## XVI. Facility Drawing

All existing facilities must include a scale drawing of the facility (See instructions for more detail).

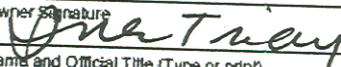
## XVII. Photographs

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

## XVIII. Certification(s)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Owner Signature



Date Signed

2-3-05

Name and Official Title (Type or print)

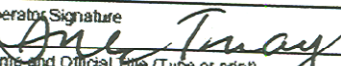
Ines R. Triay, Acting Manager, DOE/Carlsbad Field Office

Owner Signature

Date Signed

Name and Official Title (Type or print)

Operator Signature



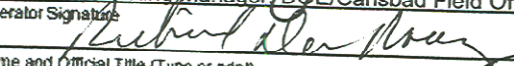
Date Signed

2-3-05

Name and Official Title (Type or print)

Ines R. Triay, Acting Manager, DOE/Carlsbad Field Office

Operator Signature



Date Signed

2/3/05

Name and Official Title (Type or print)

Richard D. Raaz, General Manager - Washington TRU Solutions, LLC

## XIX. Comments

Section XVIII Operator Signature - "See attached "RCRA Part A Application Certification"

- Previous revisions were submitted on July 9, 1991; November 12, 1992; January 29, 1993; March 2, 1995; May 26, 1995; April 12, 1996; May 29, 1996; April 21, 1999; May 10, 1999; February 2, 2001; March 7, 2001; June 18, 2001; December 27, 2002; January 16, 2003, September 11, 2003, January 12, 2004, January 15, 2004, November 24, 2004 and December 30, 2004.
- Part A originally signed on January 18, 1991, and submitted on January 22, 1991.

Note: Mail completed form to the appropriate EPA Regional or State Office. (Refer to instructions for more information)

### RCRA PART A APPLICATION CERTIFICATION

The U.S. Department of Energy (DOE), through its Carlsbad Field Office, has signed as "owner and operator," and Washington TRU Solutions LLC, the Management and Operating Contractor (MOC), has signed this application for the permitted facility as "co-operator."

The DOE has determined that dual signatures best reflect the actual apportionment of Resource Conservation and Recovery Act (RCRA) responsibilities as follows:

The DOE's RCRA responsibilities are for policy, programmatic directives, funding and scheduling decisions, Waste Isolation Pilot Plant (WIPP) requirements of DOE generator sites, auditing, and oversight of all other parties engaged in work at the WIPP, as well as general oversight.

The MOC's RCRA responsibilities are for certain day-to-day operations (in accordance with general directions given by the DOE and in the Management and Operating Contract as part of its general oversight responsibility), including, but not limited to, the following: certain waste handling, monitoring, record keeping, certain data collection, reporting, technical advice, and contingency planning.

For purposes of the certification required by Title 20 of the New Mexico Administrative Code, Chapter 4, Part 1, Subpart IX, (20.4.1.900 NMAC), incorporating 40 CFR, §270.11(d), the DOE's and the MOC's representatives certify, under penalty of law that this document and all attachments were prepared under their direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on their inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of their knowledge and belief, true, accurate, and complete for their respective areas of responsibility. We are aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Owner and Operator Signature: Inés R. Triay Inés R. Triay  
Title: Acting Manager, Carlsbad Field Office  
U.S. Department of Energy  
Date: \_\_\_\_\_

Co-Operator Signature: Richard D. Raaz Richard D. Raaz  
Title: General Manager  
for: Washington TRU Solutions LLC  
Date: 2/3/05

**Attachment B**

**Figure F-8**

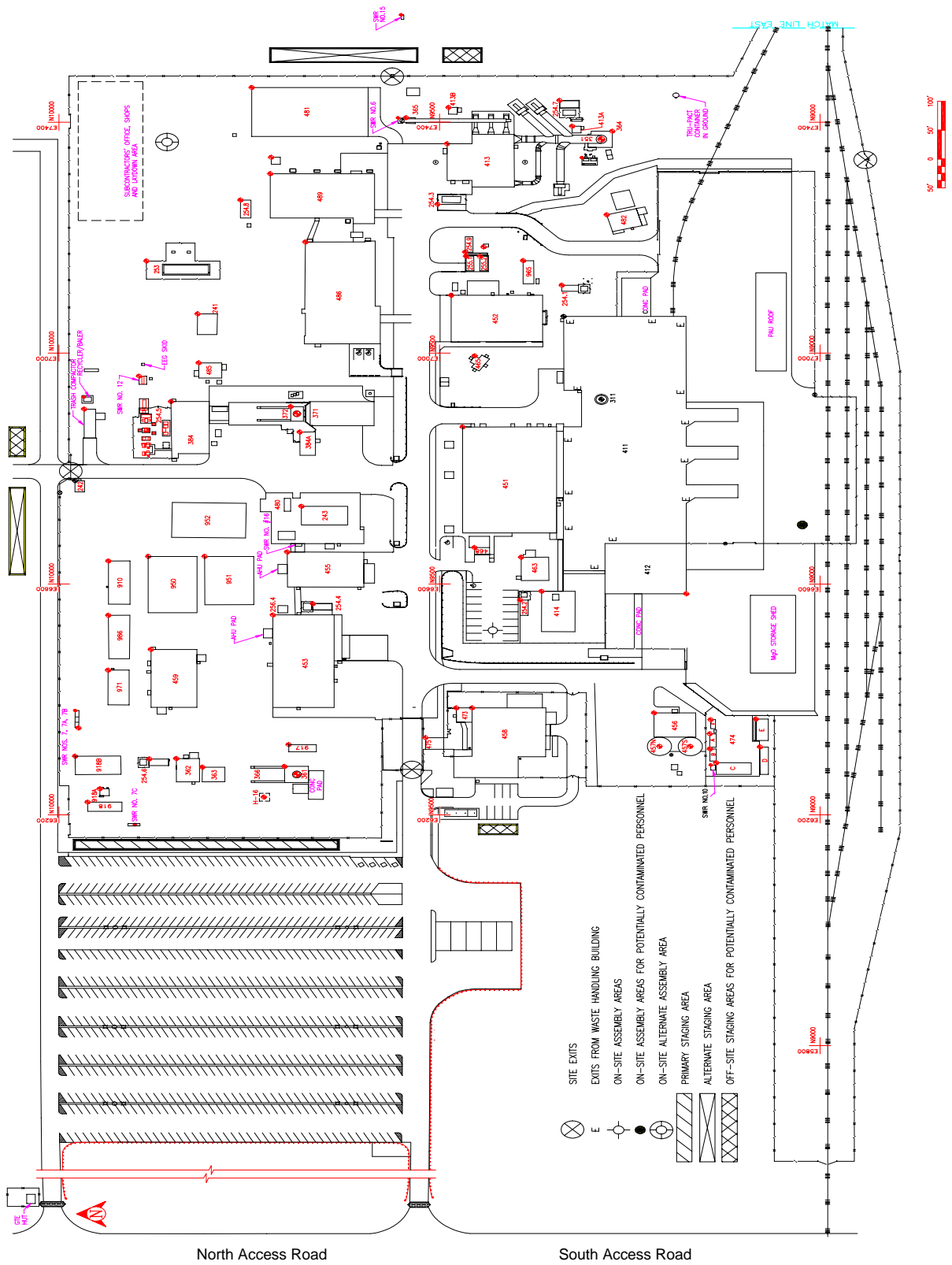


Figure F-8  
WIPP On-Site Assembly Areas and WIPP Staging Areas